

CALIFORNIA SELF-DETERMINATION PILOT PROJECT

The intent of self-determination is to facilitate consumer and family control of public funds such that they have the freedom to develop and purchase their own services.

PROPOSAL GUIDELINES

November 15, 1999

I. Vision and Principles

Vision:

Self-Determination (SD) - People with disabilities will determine their own futures, with appropriate assistance from families and friends.

Principles:

- A. Freedom. The ability for individuals with freely chosen family and/or friends to plan a life with necessary support rather than purchase a program;
- B. Authority. The ability for a person with a disability (with a social support network or circle, if needed) to control a certain sum of dollars, consistent with limits delineated in the SD Steering Committee's "Use of Public Funds," in order to purchase these supports;
- C. Support. The arranging of resources and personnel--both formal and informal--that will assist an individual with a disability to live a life in the community rich in community association and contribution; and
- D. Responsibility. The acceptance of a valued role in a person's community through competitive employment, organizational affiliations, spiritual development, and general caring for others in the community, as well as accountability for spending public dollars in ways that are life-enhancing for people with developmental disabilities. It is understood that the responsibility for using public funds wisely

does not infringe on the participant's right to: 1) make informed choices in matters which affect their quality of life including where and with whom to live, favorite people with whom to socialize, and meaningful daily activities including paid work; 2) be treated with dignity and respect and supported in making and keeping friendships, close relationships, and circles of support; 3) be fully included into the mainstream life of their natural communities and have expanding opportunities for full and equal participation in spiritual, recreational, and leisure activities with persons with and without disabilities, and homes in regular neighborhoods; 4) have children receive services and supports that are valued by their families and enrich their quality of life; 5) pursue futures of their own design, supported by flexible, creative, individually tailored services and supports in a coordinated statewide system. [The DDS Self-Determination Steering Committee adopted these principles from the *Beyond Managed Care: Self-Determination For People with Disabilities*, RWJ Foundation, First Edition, 1996, Thomas Nerney and Donald Shumway.]

II. Funding

- \$1,250,000 is appropriated for the purposes of implementing SD pilots for a period of three years.
- Funding will be used for technical assistance, evaluation, and administrative costs of operating the pilots.
- Allocation methodology: Funding for initial technical assistance and the longitudinal evaluation will be taken off the top; the remainder will be divided evenly among the three regional centers. The regional center proposals contain a line item budget that specifies how the pilot funding will be spent.
- Regional centers must maintain separate SD pilot project expenditure accounts for the purpose of submitting claims to the Department of Developmental Services (DDS).

III. Roles and Responsibilities

- DDS:

- Maintain oversight of any federal revenue impact.
 - Provide statewide SD Pilot Project leadership role.
 - Provide technical assistance and SD resources management.
 - Allocate funds for SD pilot programs.
 - Approve regional center SD implementation plans.
 - Transmit SD pilots report to the legislature by January 1, 2001.
 - Provide SD informational clearinghouse function.
 - Develop miscellaneous service code for SD pilot project expenditure tracking.
 - Schedule SD Steering Committee meetings for June 29, 1999, September 24, 1999, and quarterly thereafter on the fourth Friday of the month beginning January 28, 1999.
- Regional Centers:
 - Abide by stipulations and criteria contained in a DDS-approved SD pilot proposal.
 - Abide by stipulations and criteria of the Fair Hearing process as outlined in Title 17 (50900 thru 509064) and Welfare and Institutions Code (4700-4725).
 - Assure that consumer rights, as articulated in the Lanterman Act, are safeguarded.
 - Send a list of SD pilot consumer participants to DDS for identification of Medicaid Waiver eligible participants.
 - Assure counseling to SD consumers and families to comply with institutional deeming, which requires the consumer to receive at least one waiver service to insure their Med-Cal eligibility.
 - Maintain sufficient SD service detail, as prescribed by DDS, Federal Programs Operations Section, for waiver purposes.
 - Regional Centers and Area Boards:
 - Establish a local advisory committee, appointed jointly by the regional center and area board, made up of consumers, family members, advocates, and community leaders reflecting multi-cultural diversity and geographical profile of the catchment area. The committee is to be established and convened by April 1, 1999.

- Ensure proposals for local SD pilots demonstrate joint regional center and area board development and that local advisory committees have reviewed development of local SD pilots.
 - Jointly submit proposals, with letters of support from the local advisory committee, to DDS. Proposals must meet the requirements set forth in the State Steering Committee Agreements document and follow the Implementation Plan guidelines.
 - Notify DDS in writing regarding changes to SD proposal designs.
 - Resolve SD pilot project disputes locally in concurrence with local advisory committees.
- Local Advisory Committee:
 - Participates in the development and ongoing progress of local SD pilot programs and makes recommendations for improvement, if needed, to regional center.
 - Submits a preliminary report, summarizing their recommendations for SD pilot project improvement, to DDS by June 1, 2000.
 - Submits final recommendations for the continuation and expansion of the SD project to DDS by September 1, 2000.

IV. Federal Funding

- The Steering Committee agreed that every effort would be made to protect federal financial participation.
- DDS will be responsible for working with the federal Health Care Financing Administration and the pilots to develop or clarify policies on Waiver and Targeted Case Management.